- (3) The party has filed a request for an ALJ hearing in accordance with §405.855, or DAB review in accordance with 20 CFR 404.968
- (4) The amount remaining in controversy is \$1,000 or more.
- (5) If there is more than one party to the hearing decision, each party concurs, in writing, with the request for an EAP.
- (b) Content of the request for EAP. The request for an EAP:
- (1) Alleges that there are no material issues of fact in dispute; and
- (2) Asserts that the only factor precluding a decision favorable to the party is a statutory provision that is unconstitutional or a regulation, national coverage decision under section 1862(a)(1) of the Act, or CMS Ruling that is invalid.

[62 FR 25854, May 12, 1997]

§ 405.855 ALJ hearing.

- (a) Right to hearing. A party to the carrier hearing has a right to a hearing before an ALJ if—
- (1) The party files a written request for an ALJ hearing within 60 days after receipt of the notice of the carrier hearing decision; and
- (2) The amount remaining in controversy is \$500 or more.
- (b) Place of filing hearing request. The request for an ALJ hearing must be made in writing and filed with the carrier that issued the decision, a Social Security office, or, in the case of a qualified railroad retirement beneficiary, an office of the Railroad Retirement Board.
- (c) Effect of ALJ hearing decision. (1) An ALJ's decision is binding on all parties to the hearing unless—
- (i) The DAB reviews the ALJ decision:
- (ii) The DAB does not review the ALJ decision, and the party requests judicial review:
- (iii) The decision is revised by the DAB or an ALJ in accordance with the provisions of § 405.750 of this chapter; or
- (iv) The expedited appeals process is

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§ 405.856 Departmental Appeals Board (DAB) review.

Regulations beginning at 20 CFR 404.967 regarding SSA Appeals Council Review are applicable to DAB review of matters addressed by this subpart.

[62 FR 25854, May 12, 1997]

§ 405.857 Court review.

- (a) General rule. To the extent authorized by sections 1869, 1876(c)(5)(B), and 1879(d) of the Act, a party to a DAB decision, or an ALJ decision if the DAB does not review the ALJ's decision, may obtain a court review if the amount remaining in controversy is \$1,000 or more. A party may obtain court review by filing a civil action in a district court of the United States in accordance with the provisions of section 205(g) of the Act. The filing procedure is set forth in 20 CFR 422.210.
- (b) Prohibition against court review of certain Part B regulations or instructions. Under section 1869(b)(4) of the Act, a court may not review a regulation or instruction that relates to a method of payment under Part B if the regulation was promulgated, or the instruction issued, before January 1, 1981.

[62 FR 25854, May 12, 1997]

§ 405.860 Review of a national coverage determination (NCD).

- (a) General rule. (1) An NCD is a determination by the Secretary for whether or not a particular item or service is covered nationally under title XVIII of the Act.
- (2) An NCD does not include a determination of what code, if any, is assigned to a particular item or service covered under title XVIII or a determination for the amount of payment made for a particular item or service.
- (3) NCDs are made under section 1862(a)(1) of the Act or other applicable provisions of the Act.
- (4) An NCD is binding on all Medicare carriers, fiscal intermediaries, QIOs, HMOs, CMPs, HCPPs, the Medicare Appeals Council, and ALJs.
- (b) Review by ALJ. (1) An ALJ may not disregard, set aside, or otherwise review an NCD.
- (2) An ALJ may review the facts of a particular case to determine whether an NCD applies to a specific claim for